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CONFIRMATION NO. 5587

<b>SERIAL NUMBER</b> 09/991,721	<b>FILING OR 371(c) DATE</b> 11/13/2001 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1636	<b>ATTORNEY DOCKET NO.</b> NIH174.001C1
<b>APPLICANTS</b> J. Andrea McCart, Toronto, CANADA; David L. Bartlett, Pittsburgh, PA; Bernard Moss, Bethesda, MD;				
<b>** CONTINUING DATA *****</b> <i>DS</i> This application is a CON of PCT/US00/14679 05/26/2000 which claims benefit of 60/137,126 05/28/1999				
<b>** FOREIGN APPLICATIONS *****</b> <i>DS</i> <i>None</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 12/17/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> Verified and <i>Signature</i> Acknowledged <i>Initials</i>		<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 26
				<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 45311				
<b>TITLE</b> Combined growth factor-deleted and thymidine kinase-deleted vaccinia virus vector				
<b>FILING FEE RECEIVED</b> 1224	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	